# Statement of Organization - Candidate Committee

Yes No

Amendment

Use this form to create a new or update an existing candidate committee. This form must be accompanied by forms CRO-3100 and CRO-3500.

1. Committee Informati	ion			
a. Full Name			c. ID Num	ıber
Committe	to Elect Jeff	Taylor		
b. Mailing Address (include C			d. Date Organized	
1701 Pennyrogal Rd. New Bern, nc 28562			c. Phone N	
2. Candidate Informatio	on	Candidate's Pri		- <u>888- 7797</u>
a. Full Name	ANAPATA SALABARA AND SALABARA	c. Candidate ID Number		d. Party Affiliation
Jeff Tau	1100			Rep
b. Mailing Address (include	Aty, State, and Zip Code)	e. Office Sought		f. Jurisdiction
1701 Pennyroyal Rd. New Bern Nc 20562		Commissioner Dist. 2  (If office sought is nonpartisan, write "Nonpartisan" in [d] Party		"Nonpartisan" in [d] Party
	BOSO I APARTO MIRES III. C. C. C. C. C. C. C.	Affiliation.)		
3. Treasurer Information		4. Custodian of Books Information		
a. Full Name		a. Full Name		
	aylor			
b. Mailing Address (include Ci	ity, State, and Zip Code)	b. Mailing Address (include City, State, and Zip Code)		
Mol Pennyroyal Rd. New Bern Mc 2656				
c. Phone Number	d. Email Address	c. Phone Number	d. Email Ac	ddress
352-388- 779		6,446.		
5. Assistant Treasurer Ir		27,711, 11, 11, 11, 11, 11, 11, 11, 11, 1	(incl. CRO	
a. Full Name	Remove	a. Financial Institution Full Name Remove		
Lori Wor		First Citiza	ens	
b. Mailing Address (include Ci		b. Purpose		
PO BOX 12631, NB 28561		Campaugn		
c. Phone Number	d. Email Address	c. Account Code		d. Type
638-6268		l		Check
CERTIFICATION				
I certify that the Committee or Fund is in compliance with all applicable provisions of Article 22A, 22b, & 22D-22M of Chapter 163 of the NC General Statutes and that no funds are commingled with prohibited or other non-disclosed funds. I further certify that this report is complete, true and correct.				
JEFIFEREY 5 TAYLOR Signature of Appointed Treasurer Date				



## North Carolina

#### State Board of Elections

506 N Harrington Street Raleigh, NC 27603

Kimberly Westbrook-Strach Deputy Director – Campaign Reporting Mailing Address PO Box 27255 Raleigh, NC 27611-7255 (919) 733-7173 Fax: (919) 715-8047

### **Certification of Threshold**

This Certification is used to declare or withdraw a committee's intent to raise or spend \$1,000 or less in the current election cycle.

This Certification is only valid for political party committees and candidates for a county office, municipal office, local school board office, soil & water conservation district board of supervisors, or sanitary district board.

FILED BY:	<b>1</b>
Committee Name:	Committee to Elect Jeff Taylor
Treasurer Name:	Jeff Taylor
Treasurer Address:	1701 Pennyroyal Rd
(include city, state, & zip)	New Bern Nt 28562
Treasurer Phone:	asa- a88-7797
Check One:	
	nittee intends to neither receive nor expend more than \$1,000 during the current reduced set forth in G.S. 163-278.10A. This certification will remain in effect
until the end of the election	cycle for this committee. If this committee exceeds \$1,000 in contributions or
expenditures during this ele of elections and file required	ction cycle, I understand that I must immediately notify the appropriate board
	N ONLY BE MADE AT THE BEGINNING OF AN ELECTION CYCLE.
I am withdrawing my	Certification to remain at or under the \$1,000 threshold. I will now be required
to file the next scheduled	report for all contributions and expenditures that have not been previously
reported from the beginning	of the current election cycle. I further agree to file all future reports required.
2/26/10	

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.

Date Signed

Signature



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## **Certification of Treasurer**

This Certification is used by Candidate Committees to appoint a treasurer to the committee. This form is required and must accompany the Candidate's Statement of Organization

FILED BY:		
Candidate Name:	Jeff Taylor	
Treasurer Name:	Jeff Taylor	
Treasurer Address:	1701 Pennyroyal Rd.	
(include city, state, & zip)	new Bern nc 2856	
	· .	
Treasurer Phone:	asa- as8- 7797	

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

2/26/10 ° Date Signed

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.



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FILED BY:	
Candidate Name:	Jeff Taylor
Treasurer Name:	Lori Worley
Treasurer Address:	PO BOX (363)
(include city, state, & zip)	New Bern nc 28561
Treasurer Phone:	638-6268

I certify that the above information is correct, and I, as candidate, appoint said treasurer to personally fulfill the duties and responsibilities imposed upon the appointed treasurer and subject to the penalties and sanctions in *Subchapter VIII. Regulation of Election Campaigns* of Chapter 163 of the North Carolina General Statutes.

I understand that if the above Treasurer changes, it will be necessary to certify a new treasurer and amend the existing Statement of Organization within 10 days of the vacancy. I further understand that the above Treasurer is required to receive training by the State Board of Elections within three months of this appointment according to Article 163.278.9(k).

2/26/10 Date Signed

Signature of Candidate

Note: This Certification is to be filed at the Election Board where the committee's campaign reports are filed.